

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Approved for Form PTO-873

Application or Doctor Number
09180957a2

CLAIMS AS FILED – PART I

（图案四）

(Column 1)		(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.18(a))		
TOTAL CLAIMS (37 CFR 1.18(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.18(d))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.18(e))

* If the difference in column 1 is less than zero, enter 'U' in column 2.

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEES		RATE	FEES
X \$ ____ -	<u> </u>	OR	X \$ ____ -	<u> </u>
X \$ ____ -	<u> </u>	OR	X \$ ____ -	<u> </u>
X \$ ____ -	<u> </u>	OR	X \$ ____ -	<u> </u>
X \$ ____ -	<u> </u>	OR	X \$ ____ -	<u> </u>
TOTAL		OR	TOTAL	

CLAIMS AS AMENDED – PART II

1-24-08

(Column 1)		(Column 2)	(Column 3)
AMENDMENT A.	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total OF CLAIMS	29	29	
DISAGREEMENT OF CLAIMS	5	5	2

AU FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.103)

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
25		OR	50	
100		OR	200	700
180		OR	360	
TOTAL ADDL.FEE		OR	TOTAL ADDL.FEE	Pd.

9/16/15

AMENDMENT S	(Column 1)		(Column 2)		(Column 3)	
	CLAMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAIDED		PRESENT EXTRA	
Total (27 CFR 1.14(e))	37	Minus	29	—	—	
Independent (27 CFR 1.14(e))	5	Minus	5	—	—	

A FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (7 CFR 1.114(d))

125

AMENDMENT C	(Column 1)		(Column 2)		(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
Total of C.R. Lines	<u>22</u>	MINUS	<u>29</u>	-		
Independent DEP-claims	<u>5</u>	MINUS	<u>5</u>	-		

INITIAL INVESTIGATION OF THE TIME DEPENDENT CLASS OF CFS VACCINE

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X S =		X S =	
X X =		X X =	
+ S =		+ S =	
TOTAL ADD'L FEE		TOTAL ADD'L FEE	

• If the entry in column 3 is less than the entry in column 2, write T in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter 3.

The "Highest Number Previously Paid For" (Total or Individual) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (or by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and estimating the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1400, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.